LAKELAND NURSING HOME		•	
W3930 COUNTY ROAD NN			
ELKHORN 53121 Phone: (262) 741-3600)	Ownershi p:	County
Operated from 1/1 To 12/31 Days of Operation:	366	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/00):	295	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/00):	295	Average Daily Census:	260
Number of Residents on 12/31/00:	245	<i>y</i>	

Services Provided to Non-Residents		Age, Sex, and Primary Diagn	osis of	Residents (12/3	1/00)	Length of Stay (12/31/00)) %
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis	% 	Age Groups	%	Less Than 1 Year 1 - 4 Years	29. 0 36. 7
Supp. Home Care-Household Services Day Services	No	Developmental Disabilities Mental Illness (Org./Psy)	2. 0 33. 5	Under 65 65 - 74	11. 8 11. 0	More Than 4 Years	34. 3
Respite Care	No No	Mental Illness (Other)	2.4	75 - 84	33. 1		100. 0
Adult Day Care Adult Day Health Care	No No	Al cohol & Other Drug Abuse Para-, Quadra-, Hemiplegic	0. 0 0. 8	85 - 94 95 & 0ver	34. 3 9. 8	**************************************	********* nt
Congregate Meals Home Delivered Meals	No No	Cancer Fractures	1. 6 1. 6		100. 0	Nursing Staff per 100 R (12/31/00)	
Other Meals	No	Cardi ovascul ar	13. 1	65 & Over	88. 2		
Transportation Referral Service	No No	Cerebrovascul ar Di abetes	11. 8 1. 6	Sex	%	RNs LPNs	11. 7 7. 4
Other Services Provide Day Programming for	No	Respiratory Other Medical Conditions	2. 4 29. 0	Mal e	27. 3	Nursing Assistants Aides & Orderlies	41. 0
Mentally Ill	No	other wearear conditions		Femal e	72. 7	Artics & Orderires	41.0
Provide Day Programming for Developmentally Disabled ************************************	No	· • • • • • • • • • • • • • • • • • • •	100.0	· • • • • • • • • • • • • • • • • • • •	100.0	· • • • • • • • • • • • • • • • • • • •	***

Method of Reimbursement

		Medi (Ti tl	care e 18)		Medic (Title			0th	er	P	ri vate	Pay		Manageo	d Care		Percent
			Per Die	em		Per Die	m		Per Die	m		Per Dien	ı	Ŭ	Per Diem	Total	Of All
Level of Care	No.	%	Rate	No	. %	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0.00	9	4. 5	\$119. 26	0	0. 0	\$0.00	1	2 0	\$182.00	0	0. 0	\$0.00	10	4. 1%
Skilled Care	-		\$262. 31	173	86. 5	\$100. 92	ő	0. 0	\$0. 00 \$0. 00	31		\$157.00	0	0. 0	\$0. 00 \$0. 00	216	88. 2%
Intermediate				18	9. 0	\$84. 82	ŏ	0. 0	\$0.00	1		\$137.00	ŏ	0. 0	\$0.00	19	7. 8%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Di sabl ed				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain In	i. 0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Depender	nt 0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total		100.0		200	100. 0		0	0.0		33	100.0		0	0.0		245	100.0%

Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00 Admissions, Discharges, and Deaths During Reporting Period % Needi ng Total Assistance of Activities of Percent Admissions from: % Totally Number of Private Home/No Home Health 8.8 Daily Living (ADL) Independent One Or Two Staff Dependent Resi dents 4. 5 12. 2 Private Home/With Home Health 2.7 Baťhi ng 54.7 40.8 245 Other Nursing Homes 6.0 Dressi ng 46. 9 40.8 245 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals 77.5 Transferring 12.7 245 **55.9** 31.4 245 1. 1 Toilet Use 10. 2 54.3 35. 5 0.0 Eating 57. 1 27. 3 15. 5 245 ****** Other Locations 3.8 Total Number of Admissions 182 Continence Special Treatments Receiving Respiratory Care
Receiving Tracheostomy Care
Receiving Suctioning
Receiving Ostomy Care Percent Discharges To: Indwelling Or External Catheter 6. 9 5. 7 Private Home/No Home Health 9.7 Occ/Freq. Incontinent of Bladder 68. 2 0.0 Private Home/With Home Health 17. 9 Occ/Freq. Incontinent of Bowel 41.6 1.6 Other Nursing Homes 3. 9 0.4 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Receiving Tube Feeding Receiving Mechanically Altered Diets 2.9 Mobility 3. 7 Physically Restrained 0.5 1. 2 0.0 Other Locations 5.3 Skin Care Other Resident Characteristics 2. 9 Deaths 59.9 With Pressure Sores Have Advance Directives 98.8 Total Number of Discharges With Rashes 4. 5 Medi cati ons 207 Receiving Psychoactive Drugs (Including Deaths) **58.** 4

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

		0wnershi p:		Bed	Si ze:	Li ce	ensure:		
	Thi s	Government		200+		Ski l l ed		Al l	
	Facility	Peer	Group	Peer Group		Peer Group		Facilities	
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	88. 1	86. 7	1.02	88. 2	1.00	87. 0	1. 01	84. 5	1.04
Current Residents from In-County	79. 6	58 . 7	1. 36	47. 8	1. 67	69. 3	1. 15	77. 5	1.03
Admissions from In-County, Still Residing	29. 7	28. 8	1.03	25. 6	1. 16	22. 3	1. 33	21. 5	1.38
Admi ssi ons/Average Daily Census	70. 0	57. 6	1. 21	57. 0	1. 23	104. 1	0. 67	124. 3	0. 56
Discharges/Average Daily Census	79. 6	61. 8	1. 29	58. 7	1. 36	105. 4	0. 76	126. 1	0.63
Discharges To Private Residence/Average Daily Census	21. 9	17. 2	1. 28	16. 4	1. 34	37. 2	0. 59	49. 9	0.44
Residents Receiving Skilled Care	92. 2	82. 5	1. 12	79. 6	1. 16	87. 6	1.05	83. 3	1. 11
Residents Aged 65 and Older	88. 2	88. 2	1.00	89. 9	0. 98	93. 4	0. 94	87. 7	1.01
Title 19 (Medicaid) Funded Residents	81.6	80. 0	1. 02	78. 9	1.03	70. 7	1. 15	69. 0	1. 18
Private Pay Funded Residents	13. 5	16. 8	0. 80	17. 6	0. 76	22. 1	0.61	22. 6	0.60
Developmentally Disabled Residents	2. 0	0. 9	2. 39	0. 5	4. 27	0. 7	2.86	7. 6	0. 27
Mentally Ill Résidents	35. 9	48. 7	0.74	38. 1	0.94	37. 4	0. 96	33. 3	1.08
General Medical Service Residents	29. 0	17. 6	1.65	21. 8	1. 33	21. 1	1. 37	18. 4	1.57
Impaired ADL (Mean)	56 . 9	43. 1	1. 32	40. 9	1. 39	47. 0	1. 21	49. 4	1. 15
Psychological Problems	58. 4	59 . 3	0. 98	55. 9	1.04	49. 6	1. 18	50. 1	1. 17
Nursing Care Required (Mean)	3. 5	7. 2	0. 49	7. 3	0.48	7. 0	0. 50	7. 2	0.49